

**IN THE UNITED STATE DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

Jonathan Valentin

Plaintiff

CIVIL ACTION No. 18-1984

v.

Esperanza Housing
Counseling

Defendant

CIVIL ACTION COMPLAINT

A) FACTUAL BACKGROUND

- 1) Plaintiff's involvement with the Esperanza Housing Counsel dates back to mid 2008, during which time hereinafter Defendant also referred to as Esperanza Housing Counsel assisted Plaintiff with a mortgage modification, a pilot mortgage home equity loan and a PHFA mortgage grant.
- 2) It was mentioned by all three of Defendant's office workers, names hereinafter included as follow, Maria Iannarelli, Denise Stewart and Mr. Angel whom Plaintiff all had direct contact with that Plaintiff should sell his property to his mother's current husband, a wartime military veteran. The harassment, hazing, denial of services and legal representation began shortly after sometime after Plaintiff's PHFA mortgage grant was exhausted in early 2014.
- 3) Thereafter in early 2016 Plaintiff's home mortgage and credit case file was illegally and unwillingly closed due to Plaintiff refusal to forcefully segregate into and or with Defendant's voluntary workshop program participants. Plaintiff was then referred to a different housing and credit counseling agency under the name of PUP, (Philadelphia's Unemployment Project) for further assistance mediating through an

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A) FACTUAL BACKGROUND

Act 91 Notice and an unemployment compensation application by Plaintiff's current housing counselor, Mrs. Maria Iannarelli.

- 4) As instructed by Defendant's housing counselor, Plaintiff attempted to reach and research the PUP housing office for further assistance applying for a financial assistance mortgage modification and for unemployment compensation benefits but was informed of the agency's limited capacity and resources.
- 5) Plaintiff at this time was referred to as a, Spick by Defendant's office staff on more than one occasion while waiting in the front lobby to meet with his and or Defendant's housing counselor. Both Denise Stewart and Maria Iannarelli publicly questioned Plaintiff from behind the receptionist booth with comments such as, why don't you speak more Spanish and don't you want to help out your own race.
- 6) It was at this time that Plaintiff was denied services, benefits, legal counsel, legal representation, and reentry into the Esperanza nonprofit housing program.

B) FACUTAL ALAGATIONS

- 7) The reason for Plaintiff's complaint is due to Plaintiff's illegal and intentional case file dismissal from the Esperanza housing and credit counseling program by Defendant's office staff during an Act 91 financial assistance mortgage modification and while applying for

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unemployment compensation benefits due to his inability to speak, read and or write fluent Spanish, his criminal history/first offense, his level of education/GED, his financial statues/unemployed, his family statues/single out of wedlock first time father and or because of Plaintiff's refusal to forcefully segregate with the participants in one of Defendants voluntary workshop programs.

C) UNDERLINING CHARGES

8) Plaintiff's charges arise and extend from race-based harassment and hazing, discrimination based on race, financial statues, level of education, criminal history and family statues to illegal civil wrong doing in part because of Defendant's actions when closing Plaintiff's eight year old case file and or for the denial of services, benefits, legal counsel, legal representation and program reentry.

D) CAUSE FOR ACTIONS TAKEN

9) Plaintiff claims that because of Defendants actions, Plaintiff's negotiable credibility and employable credibility were harmed while mediating with his mortgage lender, leading to early service of an Act 91 Notice and thereafter enrollment in and out of the mortgage foreclosure diversion program thereby currently leaving Plaintiff without any resources to negotiate with when dealing with the county and or the mortgage lender for more time to resolve his still ongoing financial hardship. Plaintiff is seeking recoverable damages

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and compensatory remedies adding up to but not exciding a total of \$50,000.00 to \$75,000.00 dollars for financial obligations, personal and household expenses and loss of income accrued from 2016 till 2018 along with all pending penalties attached to a guilty verdict of any and or all allegation charges being brought forth in this court.

E) CONCLUSION

10)Plaintiff prays the court will order Defendant to award all recoverable compensatory remedies in this matter to all the parties involved, thank you.

Sincerely, Jonathan Valentin

Jonathan Valentin

1110 Elbridge St.

Philadelphia PA 19111

215-214-9431

jonathanvltn@aol.com

EXIBIT

A



DENISE STEWART
HOUSING COUNSELOR

dstewart@esperanza.us
phone (215) 324-0746
fax (215) 967-1018

visit us online: www.esperanza.us
4261 North 5th Street, Philadelphia, PA 19140



MARIA IANNARELLI
EXECUTIVE HOUSING DIRECTOR

miannarelli@esperanza.us
phone (215) 324-0746
fax (215) 324-2542

visit us online: www.esperanza.us
4261 North 5th Street, Philadelphia, PA 19140

Mortgage Contact:

Direct Contact - Rebecca
1-800-643-0202
Ext. 64932.



Mortgage Contact:

Ditech Contact - Rebecca
1-800-643-0202
Ext. 64932.

REFERRAL LETTER

SENDING OFFICE:		REFERRED TO:	
COUNSELOR	Maria Iannarelli	Firm Name	PUP
Firm Name	ESPERANZA	Address	Look below for their information
Address	4261 North 5th Street	City/State/Zip	0
City/State/Zip	Philadelphia, PA 19140	Business Phone	0
Business Phone	(215) 324-0746	FAX	0
Business Fax	(215) 967-1018	Contact	0
Counselor's Email	<u>miannarelli@esperanza.us</u>	Email:	0

SECTION 2 - CLIENT'S INFORMATION

Client's Name.	Jonathan Valentin	Current Credit Score	
Address		Date of Credit Report	
Home Phone		House hold Yr Income	
Cell Phone		# of Household members	
Email		Court Date	
Waiver Release Signed Date	Attached	Income	Attached

Brief Summary of case.

112 North Broad Street, 11th Floor
Philadelphia, PA 19102-1510

Office hours: 9 am to 5 pm Monday through Friday

Phone: 215-557-0822

Fax: 215-557-6981

112 North Broad Street, 11th Floor



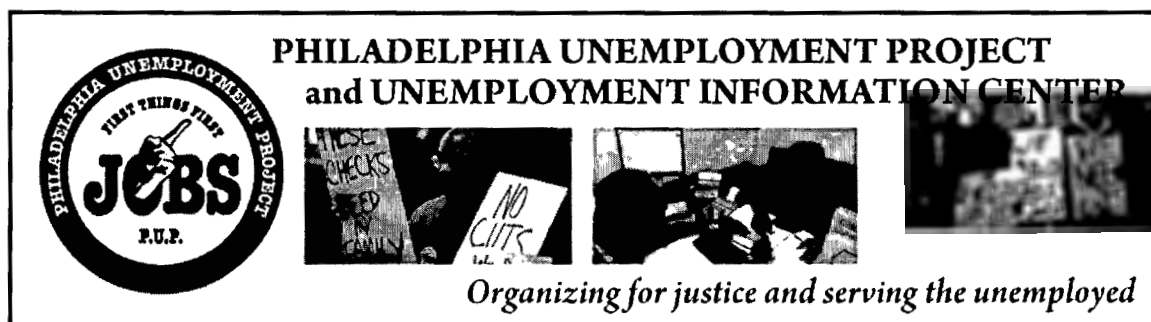
Esperanza
HOUSING
COUNSELING
YOU HOLD THE KEYS TO YOUR FUTURE

2361 N 5th. St. Philadelphia, PA 19140

Phone: 215-324-0746

Fax: 215-967-1018

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You are here: Home > Save Your Home

Quick Help Links

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[Health Resources](#)

[Apply for Benefits](#)

[Commuter Options \(PUPCO\)](#)

Save Your Home

Housing

Call the Unemployment Information Center at 215-557-0622 for help if you are behind on your mortgage. Our housing counselors may be able to help you.

THE FOLLOWING IS A BRIEF LIST OF OPTIONS THAT MIGHT BE AVAILABLE TO YOU TO HELP SAVE YOUR HOME

If you are having trouble with your mortgage you should contact a HUD approved housing counseling agency like the Unemployment Information Center (UIC). Housing counselors can help you apply for programs and navigate the foreclosure process in your area.

- HEMAP
- Diversion
 - Making Home Affordable (MHA)
 - FHA Loans
 - Conventional Fannie/Freddie Loan
 - Home Retention Grant
 - Bankruptcy
 - Emergency Petition to Postpone a Sheriff's Sale

1. HOMEOWNERS' EMERGENCY MORTGAGE ASSISTANCE PROGRAM (HEMAP)

If you receive an Act 91 Notice of Intent to Foreclose from your mortgage servicing company, you are eligible to apply for the Homeowners' Emergency Mortgage Assistance Program (HEMAP). You should contact the Save Your Home Philly Hotline immediately 215-334-4663.

HEMAP forwards funds to bring your mortgage current and, under some circumstances, to offer ongoing assistance to make regular payments. You repay a HEMAP loan based on your income. The Pennsylvania Housing Finance Agency (PHFA) reviews and determines eligibility for HEMAP.

If you have been denied HEMAP, contact our office immediately for assistance in appealing your HEMAP decision.

2. PHILADELPHIA'S MORTGAGE FORECLOSURE DIVERSION PROGRAM

Philadelphia residents can get help through the Foreclosure Diversion program of the Court of Common Pleas, instituted to reduce foreclosures in 2008. The Diversion program requires mortgage companies to negotiate with homeowners prior to a Sheriff's Sale or the granting of a judgment against the homeowner. The homeowner must contact a non-profit housing counseling agency like UIC to begin negotiating an affordable resolution to the problem with the mortgage company.

If you live in your home and the mortgage company starts the legal process of foreclosure by filing a foreclosure complaint, you are eligible for a conciliation conference in the diversion program. Contact the Save Your Home Philly Hotline immediately 215-334-4663.

3. MAKING HOME AFFORDABLE (HAMP HAUP)

Under the umbrella of federal programs known as Making Home Affordable, the Home Affordable Modification Program (HAMP) can be a way to get your mortgage company to modify your mortgage, reduce your interest rate and your monthly payments. It is possible to even reduce the amount that you owe on the mortgage in some cases.

For homeowners struggling with unemployment, you may be eligible for a program under Making Home Affordable known as the Home Affordable Unemployment Program (HAUP).

To qualify for Making Home Affordable programs, you must meet certain criteria about the type of mortgage loan you have, the investor of your loan and the timeline in receiving your mortgage loan. A housing counselor can help to navigate these questions.

3. OPTIONS FOR FHA LOANS

This option is available if you have a loan insured by the Federal Housing Administration (FHA). Mortgage companies are required by the Housing and Urban Development (HUD) guidelines to consider you for the following options:

Special Forbearance: unemployed homeowners may be eligible for a Special Forbearance. Under a Special Forbearance you make partial payments based on your income for up to twelve months. During this time period, you must actively seek employment. After finding employment, you will apply for a mortgage modification.

Partial Claim: you have enough income to make your regular payments but need help catching up on past due payments as a result of a circumstance beyond your control (illness, unemployment, emergency home repairs). A Partial Claim is a loan from HUD for up to one-third of the remaining unpaid principal balance of your loan to bring you current. There is no interest on this loan and you will not have to pay it back until your mortgage is paid off.

Mortgage Modification: if you have a circumstance beyond your control which caused you to fall behind (illness, unemployment, loss of income), you may qualify for a mortgage modification to reduce your monthly payments.

FHA-HAMP: expanded options for FHA insured homeowners to combine the Partial Claim and Mortgage Modification in a determined way to find a more affordable monthly payment.

The Unemployment Information Center can help you apply to your mortgage company for the help described above. Your mortgage company has to consider your application for this help and it cannot tell you that it cannot help you because you presently have no income or too little income if you can show that you will be able to get income in the foreseeable future.

If your mortgage company refuses to determine your eligibility for the programs above, it may be helpful to contact the FHA in writing:

U.S. Department of Housing and Urban Development
Servicing and Loss Mitigation Division
500 W. Main Street, Suite 400
Oklahoma City, OK 73102

Or by phone: 1-877-622-8525

Or contact the Consumer Finance Protection Bureau by filing a complaint: <http://www.consumerfinance.gov/complaint/>

4. CONVENTIONAL MODIFICATIONS

If you are not eligible for HAMP and you do not have a FHA Loan, you may be eligible for Making Home Affordable (above). However, certain types of loans including the investors Fannie Mae and Freddie Mac are not eligible for Making Home Affordable. You may still be able to negotiate an agreement with your mortgage company within the guidelines of the programs designed by the specific mortgage servicing company, known as an in-house modification.

Our housing counselors can also help you with negotiations with your mortgage company. The mortgage company has the power to stop the sheriff sale while it considers your situation.

6. HOUSING RETENTION GRANT PROGRAMS

The City of Philadelphia provides small grants (less than \$1,500) to assist homeowners to become current and avoid the foreclosure process. You must meet with a housing counselor to screen your eligibility for the retention grant.

In addition, the housing retention grants must be matched by funds from a homeowner's contribution.

Contact UIC at 215-657-0846 for a list of agencies. The grants are usually only available if they will, along with whatever other money you have available to you, resolve your mortgage delinquency.

7. BANKRUPTCY

In some cases, a Chapter 13 bankruptcy can be used to help you save your home. A Chapter 13 bankruptcy can be especially helpful where the default was the result of a temporary loss in income or where the mortgage is a predatory loan that can be reduced through litigation to an amount that is affordable. In some rare cases, a Chapter 7 bankruptcy can be helpful if your inability to make the mortgage payments is the result of large unsecured debts that you have been trying to pay.

A bankruptcy is not a magic solution and will often fail unless you are represented by a competent attorney and unless you have the discipline and income to follow the financial plan. Sometimes a bankruptcy can make matters worse. Homeowners should be very careful when selecting an attorney. Not all attorneys who hold themselves out as experts in bankruptcy have the ability, knowledge or willingness to take advantage of the provisions of the law that are available to help people save their homes.

B. EMERGENCY PETITION TO POSTPONE SHERIFF'S SALE

Homeowners may file an emergency petition to postpone a scheduled sheriff's sale for a limited period of time. A homeowner will be required to appear in front of a judge to explain the specific circumstances requiring a delay and how the additional time will help to reach a resolution with the mortgage company. A housing counselor can assist with this process and accompany a homeowner to the emergency hearing.

Text Size

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Contact Information

© Philadelphia Unemployment Project - 112 North Broad Street, 11th Floor - Philadelphia, PA 19102-1510

EXIBIT

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7/28/2016 3:13 PM ET

Philadelphia Works

+ 12159652489

C 1

The following pages are a continuation of an interrupted fax transmission to 12159652489 from nclfax.

2 page(s) were previously delivered. This transmission is starting from page 3.

ALTOONA UC SERVICE CENTER
1101 GREEN AVENUE
ALTOONA PA 16601-3483PHONE NO 888-313-7284
FAX NO 814-941-6801

pennsylvania

DEPARTMENT OF LABOR & INDUSTRY

OFFICE OF UNEMPLOYMENT COMPENSATION BENEFITS POLICY

DATE MAILED
APR 07, 2016

NOTICE OF FINANCIAL DETERMINATION

JONATHAN VALENTIN
1110 ELBRIDGE ST
PHILADELPHIA PA 19111-5520

SEC. SEC. ACCT. NO. 596-18-2132

OFFICE USE ONLY

AS 04/03/16 UC
CODE 3 MAX. WKS 0
PBC 0 WDA 0 MBA 0
NO DEP. 0 WDA 0 MDA 0
SX-1 OFFICE NO. 0994

Dear MR VALENTIN

You recently filed an application for unemployment compensation benefits with the Office of UC Benefits. This financial determination notifies you that you are not financially eligible for benefits. Your financial eligibility is based on the wages you were paid and the credit weeks you earned during your base year (the first four of the last five completed calendar quarters immediately prior to filing your claim) which is from JAN 01, 2015 to DEC 31, 2015.

Our records show that during your base year wages were reported by the following employer(s):

Employer(s)	Employer(s) Acct. Number	Plant No.	Breakdown of Base Year Wages by Quarter				Total Wages Paid	Credit Weeks
			1-15	2-15	3-15	4-15		
ON TARGET	39-41432		0	0	90	0	90	
STIVERS TE	72-18785		868	0	0	0	868	
EXPRESS SE	72-31341		0	1,614	98	0	1,711	
NBC PHILAD	72-61482		0	0	729	800	1,530	
THE SOLID	73-58588		560	0	0	0	560	
Totals			1,428	1,614	918	800	4,759	

Based on a comparison of your highest quarter and your total base-year wages to the table for "Rate and Amount of Benefits" you do not have sufficient wages in your base year to qualify for benefits. Your highest quarter (rounded to the nearest dollar) was the 2ND quarter of 2015 when you were paid \$1,614. Your total base-year wages were \$4,759.

IMPORTANT

Please recheck the wage information listed above for accuracy. Is your Social Security Account Number correct? Were any base-year employers omitted from this determination? Did you work in another State or for the Federal government during the base year? Are there any discrepancies in wages between this determination and your records or records you obtained from your employer(s)? If so, it is very important that you immediately notify the UC Service Center so action can be taken to correct this determination. Have this determination available when you contact the UC Service Center along with any work evidence (pay stubs, W-2 Form(s), separation notices, etc.) you have for your base year. Note: Wages that have been used before as the basis for a financially-eligible application cannot be used again for calculating financial eligibility on a subsequent application.

Right of Appeal - The last day to timely appeal this determination is APR 22, 2016. If you disagree with this determination, you may appeal. If you want to file an appeal, you must do so on or before the date shown above. For appeal information and instructions, see enclosed Form UC-47 APPEAL INSTRUCTIONS.

Note: If this determination is correct and you remain unemployed, you may reapply for benefits during the first full week of the next calendar quarter when the base year used to determine your financial eligibility changes.

Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program.

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→ 12159652489

D 2



pennsylvania

DEPARTMENT OF LABOR & INDUSTRY

OFFICE OF UNEMPLOYMENT COMPENSATION BENEFITS POLICY

CLAIMANT CERTIFICATION
AND REQUEST FOR APPEAL

Complete **only** if Pennsylvania wages and/or credit weeks are missing or incorrectly reported on the enclosed Notice of Financial Determination. If possible, provide **copies** of pay stubs and W-2 forms to verify the amounts you provide in the Claimant Certification below. Mail this form to the address of the UC Service Center shown on the front of the enclosed Notice of Financial Determination in the upper left hand corner.

IMPORTANT NOTE If you are awaiting a determination regarding your eligibility for benefits, you must file claims for weeks that you are unemployed during this period. Also, if you appeal a determination denying benefits, you must file claims while your appeal is pending.

Enter the quarter and year for wages and/or credit weeks that are incorrect or missing. Quarter 1 - Jan, Feb, Mar Quarter 2 - Apr, May, Jun Quarter 3 - Jul, Aug, Sep Quarter 4 - Oct, Nov, Dec		Wages Enter the correct gross wages you were PAID in this quarter or "ZERO" if no wages were paid in this quarter	Credit Weeks Enter the number of weeks in the quarter that you worked and earned \$116 or more (regardless of when paid)	Employer Information Enter the employer's name, address and telephone number where you worked and earned the wages and credit weeks. Please include the employer's account number (if known)	Enter the first day you worked for this employer (FDW) and the last day you worked for this employer (LDW)
2nd	2015	1,614.00	9 weeks	(215) 322-8700 Express Employment Professionals 4614 Street Rd Trevose PA 19053	FDW 04/02/2015 LDW 06/01/2015
					FDW LDW
					FDW LDW
					FDW LDW
					FDW LDW
					FDW LDW

In conclusion I was hired for a 10 week assignment and terminated after only one. There by leaving me eligible away from qualifying for UC benefits this year.

I was terminated by the client my employer had assigned me to without any advanced notice. Four days prior to the final interview and employment offer process.

If more space is needed, please attach additional pages including your name and Social Security Number on each page.

CERTIFICATION: (Please read, provide requested information and sign)

I wish to appeal the Notice of Financial Determination dated 04/03/2016

I certify that all information I have provided in this document is correct and complete. I acknowledge that false statements in this document are punishable pursuant to 18 Pa C S. § 4904, relating to unsworn falsification to authorities.

Name (please print) Jonathan Valencia Social Security No. 596-18-2132

Signature Jonathan Valencia Date: 04/18/2016

SEE REVERSE FOR IMPORTANT INFORMATION ABOUT YOUR UC BENEFIT PAYMENTS

07/28/2016 3 13 PM ET

Philadelphia Works

→ 12159652489

C3

ERIE UC SERVICE CENTER
1316 STATE STREET
ERIE PA 16501-1978

PHONE NO. 888-313-7284
FAX NO. 814-871-4863



pennsylvania

DEPARTMENT OF LABOR & INDUSTRY

OFFICE OF UNEMPLOYMENT COMPENSATION BENEFITS POLICY

DATE MAILED
JUL 22, 2016

NOTICE OF FINANCIAL DETERMINATION

SOC.SEC ACCT.NO 596-18-2132

OFFICE USE ONLY

As 07/17/16 UC

CODE U MAX.WKS 0

PBC 0 WBR 0 MBA 0

NO.DEP 0 WDA 0 MDA 0

SX-1 OFFICE NO 0993

JONATHAN VALENTIN
1110 ELBRIDGE ST
PHILADELPHIA PA 19111-5520

Dear MR VALENTIN:

You recently filed an application for unemployment compensation benefits with the Office of UC Benefits. This financial determination notifies you that you are not financially eligible for benefits. Your financial eligibility is based on the wages you were paid and the credit weeks you earned during your base year (the first four of the last five completed calendar quarters immediately prior to filing your claim) which is from APR 01, 2015 to MAR 31, 2016.

Our records show that during your base year, wages were reported by the following employer(s):

Employer(s)	Employer(s) Acct. Number	Plant No.	Breakdown of Base-Year Wages by Quarter				Total Wages Paid	Credit Weeks
			2-15	3-15	4-15	1-16		
ON TARGET	39-41432		0	90	0	0	90	
EXPRESS SE	72-31341		1,614	98	0	0	1,710	
NBC PHILAD	72-61482		0	729	800	0	1,531	
ASW SUPPOR	75-04225		0	0	0	54	54	
WAL-MART A	99-87762		0	0	0	2,000	2,000	
Totals			1,614	916	800	2,054	5,385	10

Based on the information shown above, you are ineligible for benefits because you do not have 18 or more "credit weeks" during your base year. A "credit week" is any calendar week during the base year in which you earned (without regard to when paid) at least \$116 in covered employment.

IMPORTANT

Please recheck the wage and credit week information listed above for accuracy. Is your Social Security Account Number correct? Were any base-year employers omitted from this determination? Did you work in another State or for the Federal government during the base year? Are there any discrepancies in wages between this determination and your records or records you obtained from your employer(s)? If so, it is very important that you immediately notify the UC Service Center so action can be taken to correct this determination. Have this determination available when you contact the UC Service Center along with any work evidence (pay stubs, W-2 Forms), separation notices, etc.) you have for your base year. Note: Wages that have been used before as the basis for a financially eligible application cannot be used again for calculating financial eligibility on a subsequent application.

Right of Appeal - The last day to timely appeal this determination is: **AUG 08, 2016**. If you disagree with this determination, you may appeal. If you want to file an appeal, you must do so on or before the date shown above. For appeal information and instructions, see enclosed Form UC-47, APPEAL INSTRUCTIONS.

If you file an appeal, you must continue to file your claims as directed by the UC Service Center pending resolution of your appeal.

Note: If this determination is correct and you remain unemployed, you may reapply for benefits during the first full week of the next calendar quarter when the base year used to determine your financial eligibility changes.

Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program.

07/28/2016 3 13 PM ET

Philadelphia Works

12159652489

D 4



CLAIMANT CERTIFICATION AND REQUEST FOR APPEAL

Complete **only** if Pennsylvania wages and/or credit weeks are missing or incorrectly reported on the enclosed Notice of Financial Determination. If possible, provide **copies** of pay stubs and W-2 forms to verify the amounts you provide in the Claimant Certification below. Mail this form to the address of the UC Service Center shown on the front of the enclosed Notice of Financial Determination in the upper left hand corner.

IMPORTANT NOTE: If you are awaiting a determination regarding your eligibility for benefits, you must file claims for weeks that you are unemployed during this period. Also, if you appeal a determination denying benefits, you must file claims while your appeal is pending.

Enter the quarter and year for wages and/or credit weeks that are incorrect or missing. Quarter 1 - Jan, Feb, Mar Quarter 2 - Apr, May, Jun Quarter 3 - Jul, Aug, Sep Quarter 4 - Oct, Nov, Dec	Wages Enter the correct gross wages you were PAID in this quarter or "ZERO" if no wages were paid in this quarter	Credit Weeks Enter the number of weeks in the quarter that you worked and earned \$116 or more (regardless of when paid)	Employer Information Enter the employer's name, address and telephone number where you worked and earned the wages and credit weeks. Please include the employer's account number (if known)	Enter the first day you worked for this employer (FDW) and the last day you worked for this employer (LDW)
1st 2016	2,054.00	3 weeks	Wal Mart Store Inc. 702 SW 8th St 72716 Bentonville AR 1-888-442-6377	FDW 12/29/2015 LDW 12/29/2015
2nd 2015	1,614.00	9 weeks	Express Employment Professionals (215) 322-8700	FDW 04/07/2015 LDW 06/01/2015
I was terminated by the client my employer had assigned me to without any advanced warning or notice. Four days prior to the final date of employment as previously stated during the interviewing and employment offer process.				FDW LDW
In conclusion, I was hired for a nine week assignment and terminated after only eight weeks by leaving me eighty dollars away from qualifying for UC benefits this year.				FDW LDW

If more space is needed, please attach additional pages including your name and Social Security Number on each page.

CERTIFICATION: (Please read, provide requested information and sign)

I wish to appeal the Notice of Financial Determination dated: _____

I certify that all information I have provided in this document is correct and complete. I acknowledge that false statements in this document are punishable pursuant to 18 Pa C S § 4904, relating to unsworn falsification to authorities.

Name (please print): Jonathan Valentin Social Security No 536-18-2132

Signature: Jonathan Valentin Date: 07/25/2016

SEE REVERSE FOR IMPORTANT INFORMATION ABOUT YOUR UC BENEFIT PAYMENTS

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF LABOR AND INDUSTRY
BUREAU OF UC BENEFITS AND ALLOWANCES

NOTICE OF DETERMINATION

The final day to timely appeal this determination is

9/28/16

Claimant JONATHAN VALENTIN
Name 1110 ELBRIDGE ST
And PHILADELPHIA, PA 19111-5520
Address

SOCIAL SECURITY ACCOUNT NUMBER

5	9	6	1	8	2	1	3	2
---	---	---	---	---	---	---	---	---

AB Date 160717

Claim Type UC

RIGHT OF APPEAL

IF YOU DISAGREE WITH THIS DETERMINATION, YOU MAY APPEAL. IF YOU WANT TO FILE AN APPEAL, YOU MUST DO SO ON OR BEFORE THE DATE SHOWN ABOVE. SEE ATTACHED FOR APPEAL INSTRUCTIONS.

FINDINGS OF FACT:

- 1 The Claimant was last employed by ASW SUPPORT on 3/31/16
- 2 The Employer provided information that the Claimant voluntarily quit the job
- 3 The Claimant did not voluntarily quit the job

DISCUSSION:

Due to a conflict regarding the Claimant's reason for separation, the Claimant's eligibility must be considered under both Sections 402(b) and 402(e) of the Pennsylvania UC Law. Section 402(b) provides, in part, that a claimant is ineligible for benefits where he/she voluntarily leaves work without a necessitous and compelling reason. In this case, it has been determined that the employer initiated the separation. As such, the separation must be adjudicated under Section 402(e) of the Law.

Section 402(e) of the Law provides, in part, that benefits shall be denied for any week in which the claimant is unemployed due to being discharged for willful misconduct connected with the work. The burden is on the Employer to establish that the incident which caused the claimant's separation was willful misconduct connected with the work before benefits can be denied under Section 402(e). In this situation, the Employer provided information that the Claimant voluntarily left the job, and did not provide any information to show that the separation was due to willful misconduct connected with the work. Since the Employer initiated the separation and there was no information to show willful misconduct, the Employer has not sustained

DETERMINATION

In accordance with the provisions of the Pennsylvania Unemployment Compensation law, the following are

APPROVED under Section(s) 402(E) of the Law

Application for Benefits Dated 160717

Claim for Waiting Week Ending 160723

Claim(s) for Week(s) Ending 160730-160910

DISAPPROVED under Section(s) _____ of the Law

Application for Benefits dated _____

Claim for Waiting Week Ending _____

Claim(s) for Week(s) Ending _____

[Signature]
SIGNATURE OF OFFICE REPRESENTATIVE

☒ Mailed on 9/13/16

☐ Delivered on _____
DATE

Employer Name ASW SUPPORT
And 151 FORSYTHIA DR SOUTH
Address LEVITTOWN PA 19056

Erie UC Service Center
1316 State Street
Erie, PA 16501
Phone (888) 313-7284
Fax (814) 871-4863

PROVISIONS OF THE PENNSYLVANIA UNEMPLOYMENT COMPENSATION LAW

<p>Section 4(u) provides</p> <p>An individual shall be deemed unemployed (i) with respect to any week (i) during which he/she performs no services for which remuneration is paid or payable to him/her and (ii) with respect to which no remuneration is paid or payable to him/her, or (ii), with respect to any week of less than full-time work if the remuneration paid or payable to him/her with respect to such week is less than his/her weekly benefit rate plus his/her partial benefit credit.</p>	
<p>Section 4(w) provides that to file a valid application for benefits, a claimant must:</p>	
<p>4(w)(1)(1) Be separated from work or if employed, have worked less than full time due to lack of work.</p>	<p>402(a.1) In which his/her unemployment is due to failure to accept an offer of suitable full-time work in order to pursue seasonal or part-time employment.</p>
<p>4(w)(1)(2) Be qualified under the provisions of Section 401 (a), (b), and (d). If the application for benefits is filed after the termination of the preceding benefit year have, subsequent to the beginning of the preceding benefit year and prior to the filing of this application, worked and earned wages, whether or not the work was in "employment" as defined in this Act, in an amount equal to or in excess of six (6) times his/her weekly benefit rate in effect during his/her preceding benefit year.</p>	<p>402(b) If his/her unemployment is due to voluntarily leaving work without cause of a necessitous and compelling nature. However no eligible claimant shall be denied benefits for exercising a layoff option pursuant to a labor-management contract, agreement, plan, program or policy.</p>
<p>4(w)(2) If the application for benefits is filed after the termination of the preceding benefit year have, subsequent to the beginning of the preceding benefit year and prior to the filing of this application, worked and earned wages, whether or not the work was in "employment" as defined in this Act, in an amount equal to or in excess of six (6) times his/her weekly benefit rate in effect during his/her preceding benefit year.</p>	<p>402(c) That he/she is receiving or claiming unemployment benefits under an unemployment compensation law of another state or the Federal government.</p>
<p>Section 401 provides that compensation shall be payable if the claimant has been unemployed and</p>	<p>402(e). (e.1) If his/her unemployment is due to suspension or discharge for willful misconduct connected with his/her work or to failure to submit and/or pass a drug test conducted pursuant to an employer's established substance abuse policy, provided the drug test is not in violation of the law or a collective bargaining agreement.</p>
<p>401 (a) Has, within his/her base year, been paid wages for employment, provided that not less than 20% of the total base year wages have been paid outside the high quarter.</p>	<p>402(h) In which a person is engaged in self-employment, provided, however, that an employee who is able and available for full-time work shall not be deemed ineligible by reason of continued participation without substantial change during a period of unemployment in any activity including farming operations, undertaken while customarily employed by an employer in full-time work and continued subsequent to separation from such work, when such activity is not engaged in as a primary source of livelihood. Net earnings received from such activity shall be deemed remuneration paid or payable with respect to the period of the activity.</p>
<p>401 (b) Has registered for work.</p>	
<p>401 (c) Has made a valid application for benefits with respect to the benefit year for which compensation is claimed and has made a claim for compensation in the proper manner and on the form prescribed by the Department.</p>	
<p>401 (d)(1) Is able to work and available for suitable work. Provided, that no otherwise eligible claimant shall be denied benefits for any week because he/she is in training with the approval of the Secretary nor shall such individual be denied benefits with respect to any week in which he/she is in training with the approval of the Secretary by reason of the application of the provisions of this subsection relating to availability for work or the provisions of Section 402(a) of this Act relating to failure to apply for or a refusal to accept suitable work.</p>	<p>402 1(1), (2), (3), (4) In which he/she was a professional or nonprofessional school employee or an employee of an Educational Service Agency for any week(s) which begins during established and customary vacation periods, including between term periods and summer recess(es).</p>
<p>401(d)(2) No otherwise eligible claimant shall be denied benefits for any week in which his/her unemployment is due to exercising the option of accepting a layoff, from an available position, pursuant to a labor-management contract, or pursuant to an established employer plan, program or policy.</p>	<p>402 4 Unless the claimant was an officer of a corporation exercised a substantial degree of control over the corporation and has become unemployed due to the fact that the corporation has entered into involuntary bankruptcy proceedings under the provisions of Chapter 7, Title 11, of the United States Code.</p>
<p>401 (e) Has filed a valid waiting week.</p>	<p>402 5 A seasonal worker shall be ineligible for benefits for any week of unemployment occurring outside the normal seasonal period of operation, provided there is a contract or reasonable assurance that such seasonal worker will perform services in the next normal seasonal period unless upon presenting himself for work, the individual is not offered an opportunity to perform such services.</p>
<p>401 (f) Earned six times his/her weekly benefit rate subsequent to a separation from work under circumstances which are disqualifying under the provisions of Sections 402(b), 402(e) and 402(h).</p>	<p>Section 404(d)(1) of the Law provides:</p>
<p>Section 402 of the Law provides that a claimant shall be ineligible to receive compensation for any week.</p>	<p>In part, that a claimant who is eligible to receive benefits for any week, shall be paid, with respect to such week, compensation in an amount equal to the claimant's weekly benefit rate less the total of (i) the remuneration, if any, paid or payable to him/her with respect to such week for services performed which is in excess of his/her partial benefit credit; and (ii) vacation pay, if any, which is in excess of his/her partial benefit credit, except when paid to an employee who is permanently or indefinitely separated from his/her employment.</p>
<p>402(a) In which his/her unemployment is due to failure, without good cause, either to apply for suitable work at such time and in such manner as the Department may prescribe, or to accept suitable work when offered to him/her by the employment office or by an employer, irrespective of whether or not such work is in "employment" as defined in this Act. Provided, that such employer notifies the employment office of such</p>	

*Disqualification may be removed by compliance with requirement of Section 401 (f).

THE ABOVE EXPLANATION OF THE LAW IS PROVIDED FOR YOUR CONVENIENCE ONLY. A COPY OF THE LAW IS AVAILABLE FOR REFERENCE BY CONTACTING THE UC SERVICE CENTER THAT ISSUED THIS DETERMINATION OR BY VISITING THE DEPARTMENT OF LABOR AND INDUSTRY WEBSITE AT www.dli.state.pa.us (CLICK ON "LAWS & REGULATIONS" IN THE LEFT COLUMN AND THEN SELECT "UNEMPLOYMENT COMPENSATION LAW" FROM THE LIST) FOR A FURTHER EXPLANATION OF THIS DETERMINATION, CONTACT THE OFFICE SHOWN ON THE FRONT OF THIS FORM.

CONTRIBUTING BASE-YEAR EMPLOYER: This is not a determination on relief from charges. However this determination may affect a request for relief from charges.

- An appeal to a claimant's eligibility and a request for relief from charges must be filed separately.
- For procedures and time limits for requesting relief from charges, see Form UC-44FR previously sent to you with the claimant's Notice of Financial Determination or contact the Employers' Charge Section, 7th Floor Labor and Industry Building, 7th and Forster Streets, Harrisburg, PA 17121.

**UNEMPLOYMENT COMPENSATION
BOARD OF REVIEW**
Department of Labor & Industry
Commonwealth of Pennsylvania



APPEAL NUMBER FR-16-09-R-1362
DATE MAILED 10/12/2016
FINAL DATE
TO APPEAL 10/27/2016
SSN 596-18-2132

REFEREE'S DECISION/ORDER - Relief from Charges

CLAIMANT

JONATHAN VALENTIN
1110 ELBRIDGE ST
PHILADELPHIA PA 19111-5520

EMPLOYER

EXPRESS EMPLOYMENT PROFESSIONALS
4614 E STREET RD
TREVOST PA 19053

CLAIM:

FILED: 7/17/2016

RFC DETERMINATIONS ISSUED: 9/9/2016 BY BUREAU OF UC BENEFITS & ALLOWANCES
EMPLOYER'S REQUEST FOR RELIEF FROM CHARGE Ineligible

APPEAL:

FILED: 9/15/2016 BY Employer

HEARING HELD: 10/7/2016 IN: PHILADELPHIA, PA

ATTENDED BY: Claimant

ENCLOSURE: A translation document UC-1627 is enclosed with this notice

FINDINGS OF FACT

1. The claimant filed an Application for Benefits with an effective date of July 17, 2016
2. The employer requested Relief from Charges.
3. On September 9, 2016, the Employers' Charge Appeals Unit denied the employer's request for Relief from Charges in accordance with Section 302(a)(1) of the Law
4. The employer filed an appeal to the denial of the employer's request for Relief from Charges

ISSUE: Is the employer entitled to Relief from Charges under Section 302(a)(1) of the Law?

REASONING: Although duly notified of the date, time and place of the Referee's Hearing, the employer failed to appear for the hearing to present testimony and evidence on the issues under appeal. The above

Claimant — JONATHAN VALENTIN

Appeal — FR-16-09-R-1362

findings represent the competent evidence presented at the hearing by the claimant, in addition to a careful review of the documentary evidence of record, under which the Referee renders the following decision.

Section 302.1 of the Pennsylvania Unemployment Compensation Law states in relevant part as follows:

Notwithstanding any other provisions of this act assigning charges for compensation paid to employees, the department shall relieve an employer of charges for compensation in accordance with this section and Section 213 of this act.

(a) Circumstances allowing relief

- (1) If an individual was separated from his most recent work for an employer due to being discharged for willful misconduct connected with that work, or due to his leaving that work without good cause attributable to his employment, or due to his being separated from such work under conditions which would result in disqualification for benefits under the provisions of Section 3 or 402(e 1) of this act, the employer shall be relieved of charges for compensation paid to the individual with respect to any week of unemployment occurring subsequent to such separation. Relief from charges under this paragraph terminates if the employee returns to work for the employer.

In the present case, the claimant testified that he worked as a full-time Clerk, and his assignment abruptly ended on June 1, 2015. The claimant testified that he contacted the employer to request other assignments but no work was offered to him after this assignment ended

As noted, the employer failed to appear for the hearing to present testimony or evidence to meet its burden. Here, the evidence of record reveals no competent evidence to do so. Therefore, the employer's request for Relief from Charges is denied.

ORDER: The Determination of the Employers' Charge Appeals Unit is **AFFIRMED**, the employer's request for Relief from Charges is **DENIED** in accordance with Section 302(a)(1) of the Pennsylvania Unemployment Compensation Law. As such, the employer will be charged in accordance with the claimant's Notice of Financial Determination for the Unemployment Benefits paid.

Zarin Bengali, Referee

dp - 9140

Pursuant to the provisions of the Law, this referee decision shall become final on the date it was mailed to the parties, unless any aggrieved party files a further appeal to the Pennsylvania Unemployment Compensation Board of Review within the fifteen (15) day appeal period.

THE LAST DATE TO FILE AN APPEAL TO THIS DECISION IS 10/27/2016

Claimant — JONATHAN VALENTIN

Appeal — FR-16-09-R-1362

IF YOU WISH TO FILE A FURTHER APPEAL

You have the right to file a further appeal to this decision within fifteen (15) days of the date of mailing. Your appeal must include the following information: ► your name, ► the claimant's name and social security number, ► the date of the decision being appealed; ► the reason for appeal; ► the appeal number; ► your address. Under the provisions of Act 5 of 2005, you may file your own appeal, or your appeal may be filed by an attorney or by any other advocate of your choice.

You may file your appeal by mail. If you file your appeal by mail, the appeal is filed as of the date of the U.S. Postal Service postmark or a U.S. Postal Service form 3817 (Certificate of Mailing) or a U.S. Postal Service certified mail receipt. If there is no U.S. Postal Service postmark, the date of filing will be the date of a postage meter mark on the envelope containing the appeal. If the appeal contains neither a postmark nor a postage meter mark, the date of filing will be the date recorded by the Department when the appeal is received. Your appeal should be mailed to the following address:

**Department of Labor & Industry
UC Board of Review, Room 1119
651 Boas Street
Harrisburg, PA 17121**

You may file your appeal by common carrier. If you file your appeal by common carrier, the appeal is filed on the date it is delivered to the common carrier as established by the records of the common carrier. You should use the above address to send your appeal by common carrier.

You may file your appeal by fax. If you file your appeal by fax, it must be received by the Department by 11:59 p.m. on the last day to appeal. The filing date will be determined by the date of receipt imprinted by the receiving fax machine. If there is no receipt date imprinted by the receiving fax machine, the sender's fax banner will control the date of filing. If neither date appears on the fax, the date of receipt recorded by the Department will serve as the date of filing. Your appeal should be **faxed** to the following number.

717-346-4484

NOTE: A party filing an appeal by fax is responsible for delay, disruption or interruption of electronic signals and readability of the document and accepts the risk that the appeal may not be properly or timely filed.

You may file your appeal via electronic mail (email). If you file your appeal by email, the appeal is filed on the date of receipt recorded by the Department's electronic transmission system. If you wish to file your appeal by email, forward your appeal information to the Department at:

UCBoardAppeals@pa.gov

WARNING: Information submitted by email is not secure.

NOTE: A party filing an appeal via the internet or electronic mail is responsible for using the proper format and for delay, disruption or interruption of electronic signals and readability of the document and accepts the risk that the appeal may not be properly or timely filed.

If you wish to file your appeal **in person**, you may do so at any CareerLink office during normal business

Claimant — JONATHAN VALENTIN

Appeal — FR-16-09-R-1362

hours on or before the last day to appeal shown above. The CareerLink office will forward your appeal to the UC Board of Review for processing.

***Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program***

Claimant — JONATHAN VALENTIN

Appeal — FR-16-09-R-1362

ADDITIONAL INTERESTED PARTIES OR APPEARANCES AT HEARING

Employer

EXPRESS EMPLOYMENT PROFESSIONALS
PO BOX 720660
OKLAHOMA CITY OK 73172

Claimant — JONATHAN VALENTIN

Appeal — FR-16-09-R-1362

on this notice. The UC Board of Review cannot be responsible for misdirected emails.

Please be aware that participation in hearings by email is not permitted

Purpose of Hearing

The Referee elicits testimony and gathers all facts relating to the case and has no special or personal interest in the matter. The hearing is not a "roundtable" discussion. The Referee will limit the testimony, questioning and evidence to the issues before the Referee.

You should attend the hearing to protect your rights. You have the right to:

- present the testimony and evidence of the party and witnesses
- question opposing parties and witnesses
- be represented by an attorney or other advocate

Representation at the Hearing

Under the provisions of Act 5 of 2005, you may represent yourself or you may be represented by an attorney or any other advocate of your choice throughout the appeal process.

Although hearings are informal, they involve witnesses, sworn testimony, cross-examination and rebuttals and also are recorded. Whether you are represented or not, the Referee endeavors to develop testimony regarding the pertinent facts and conduct a fair and impartial hearing.

When you report for the hearing or if you wish to review your case file prior to the hearing you must provide some form of identification, which may include this notice.

Preparing for the Hearing

Organize the facts, circumstances and evidence relating to the appeal. Gather any documents you have that concern the case. You may wish to make copies of documents you intend to take to the hearing. Any documents that are made part of the hearing record cannot be returned to you.

You may have witnesses testify in your behalf. Be sure to bring witnesses who directly observed, heard, or participated in the matters about which they are to testify. What a witness learned second-hand may not, depending on the circumstances, be considered at the hearing. You must notify such witnesses about the date, time and place of the hearing. Also, you must arrange for them to be present and to provide any relevant documents. If a witness refuses to appear or provide documentary evidence, you may submit a written request in advance of the hearing to the Referee for a subpoena, as outlined below.

Do You Need Assistance? — ¿Necesita Ayuda? – Póngase inmediata mente en contacto con la oficina de arbitros llamando al número de teléfono que aparece en éste aviso.

If you require assistance because of a disability with hearing, speech and/or vision or you need an interpreter for your own language other than English, **contact the Referee's office listed on this notice as soon as possible.** The Board is responsible to provide an appropriate device or qualified interpreter whose credentials are certified for quasijudicial proceedings. Also, the Board covers the costs required to provide this assistance.

Any interested party at an appeal hearing must be able to deal effectively with both written evidence and oral testimony. If you cannot participate satisfactorily, it causes delay and/or misunderstanding of the decision.

Requests may be submitted to the Referee for the items listed below. Any request should provide the claimant's name and the appeal number, state the action requested and include specific reasons for the request, which may be mailed, faxed or emailed.

- **Subpoena** — If the witness refuses to appear or provide documentary evidence, you may request that a subpoena be issued to assure the requested presence at the hearing. The Referee will issue a subpoena if appropriate. **Requests for a subpoena must be made in writing.**

**UNEMPLOYMENT COMPENSATION
BOARD OF REVIEW**
Department of Labor & Industry
Commonwealth of Pennsylvania



APPEAL NUMBER 16-09-C-B584
DATE MAILED 10/25/2016
FINAL DATE
TO APPEAL 11/09/2016
SSN 596-18-2132

REFEREE'S DECISION/ORDER

CLAIMANT

- EMPLOYER

JONATHAN VALENTIN
1110 ELBRIDGE STREET
PHILADELPHIA PA 19111-5520
US

TOPAZ LIGHTING CORPORATION
925 WAVERLY AVENUE
HOLTSVILLE NY 11742
US

CLAIM:

FILED: 7/17/2016

DETERMINATIONS ISSUED: 9/7/2016 BY FRIE UC SERVICE CENTER

CLAIMANT DETERMINED UNDER UC LAW Ineligible 402(e)

FOR WAITING WEEK ENDING 7/23/2016

FOR COMPENSABLE WEEK/S ENDING

APPEAL:

FILED 9/16/2016 BY Claimant

HEARING HELD 10/19/2016 IN Philadelphia, PA

ATTENDED BY Claimant, Employer

ENCLOSURE: A translation document UC-1627 is enclosed with this notice.

FINDINGS OF FACT

- 1 For the purpose of this appeal, Claimant last worked for Topaz Lighting Corporation as a full-time Warehouse Associate from March 29, 2016 until March 30, 2016 with a final rate of pay of \$11 per hour
- 2 On March 30, 2016, the Employer received two complaints about the Claimant's use of racial and sexual slurs towards the two co-workers
- 3 The Claimant felt his co-workers were calling him unacceptable names

Claimant — JONATHAN VALENTIN

Appeal — 16-09-C-B584

4. When informed of the accusations of unacceptable behaviors, the Claimant initially denied the accusations and after appearing to become angry informed the Employer he did nothing incorrect and would do it again

5. The Claimant was discharged for violating the Employer's standards of behavior

ISSUE Was the Claimant discharged for willful misconduct?

REASONING. Section 402 of the Pennsylvania-Unemployment Compensation Law provides in relevant part as follows.

An employee shall be ineligible for compensation for any week --

(e) In which his unemployment is due to his discharge or temporary suspension from work for willful misconduct connected with his work.

In this case, the Claimant felt that he had been treated unfairly by his co-workers but the Employer does not recall the Claimant making a complaint. On the other hand, the Employer received complaints of the Claimant's unacceptable behavior towards two co-workers. The Claimant does not admit to inappropriate or incorrect behavior.

While we do not question the right of the Employer to discharge an employee for any reason whatsoever, in order to deny that employee Unemployment Compensation Benefits, willful misconduct must be shown. The burden of proof is upon the Employer and must be established with competent first-hand testimony.

Since the Employer has not provided any first-hand testimony regarding the allegations of the Claimant's improper behavior, the Referee must find that benefits cannot be denied under the provisions of Section 402(e) of the Law.

ORDER. The Decision of the Unemployment Compensation Service Center is **REVERSED**. Benefits are **ALLOWED** beginning with waiting week ending July 23, 2016 under Section 402(e) of the Pennsylvania Unemployment Compensation Law.

Margaret Frick-Raab, Referee

mam - 9140

Pursuant to the provisions of the Law, this referee decision shall become final on the date it was mailed to the parties, unless any aggrieved party files a further appeal to the Pennsylvania Unemployment Compensation Board of Review within the fifteen (15) day appeal period.

THE LAST DATE TO FILE AN APPEAL TO THIS DECISION IS 11/09/2016

Claimant — JONATHAN VALENTIN

Appeal — 16-09-C-B584

IF YOU WISH TO FILE A FURTHER APPEAL

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Claimant — JONATHAN VALENTIN

Appeal — 16-09-C-B584

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Equal Opportunity Employer/Program***

EXHIBIT

C



Philadelphia Council for Community Advancement
Empowering Households and Communities Since 1962

Comprehensive Housing Counseling | Financial Education | Community Development Services

**CONFIRMATION OF FACE-TO-FACE MEETING
AND PROCESSING INFORMATION FOR
DEFAULT AND DELINQUENT MORTGAGE COUNSELING**

Date

Aug. 22, 2016

Dear

Jonathan

This is to confirm your appointment for **Default and Delinquent Mortgage Counseling** in our office on Sept 9, 2016 at 10:30 A.M./P.M. with Sophie Bell, Counselor. In order to expedite the completion of your application please bring copies of the following documents that only apply to you

- 1 **LETTER OF CIRCUMSTANCE** - Please write a **detailed** letter explaining the reason(s) for your mortgage delinquency. Please be as specific as possible. This letter is very important in determining your eligibility for assistance.
- 2 **All foreclosure notices & letters received from any lender.**
 - a) **ACT 91** - Notice of HEMAP Program
 - b) **ACT 6** - Notice of Intention to Foreclose
- 3 **EVIDENCE OR DOCUMENTED PROOF OF CIRCUMSTANCES** such as medical bills or proof of layoff
- 4 **CURRENT MORTGAGE BILLING STATEMENT** and any other notices. (Complaint, Sheriff's Sale Notice)
- 5 **CREDIT CARD STATEMENTS, CAR NOTES AND STUDENT LOAN STATEMENTS**
- 6 **PAY STUBS** - one month of consecutive stubs for all working household members.
7. **CURRENT VERIFICATION OF OTHER INCOME** - (profit and loss statement if self-employed, unemployment compensation, workers' compensation, child support, alimony, public assistance, social security, rent, pensions, etc.).
8. **EMPLOYMENT HISTORY FOR THE PAST 5 YEARS** - a copy of your current resume.
9. **FEDERAL INCOME TAX RETURNS** for the past 2 years (1040, W2 and all schedules).
Transcripts can be obtained by visiting IRS.gov and click on "Order a Return or Account Transcript" or call 1-800-908-9946.
- 10 **DEED TO PROPERTY** (this can be obtained from your County Courthouse)
- 11 **(2) MONTHLY STATEMENTS** of all loans and charge accounts (account numbers & balances)
- 12 **(1) MONTH OF CURRENT UTILITY BILLS** (water, gas, electric)
- 13 **Proof of REAL ESTATE TAXES** (if not escrowed by mortgagee or your lender). Copies of tax bills can be obtained from your county and township government offices.)
14. **HOMEOWNER'S INSURANCE POLICY** - (can be obtained from Insurance Agent)
- 15 **(2) MONTHS OF CHECKING & SAVINGS ACCOUNT STATEMENTS, VERIFYING CURRENT BALANCES**
- 16 **STATEMENTS OF VERIFICATION** for any stocks, bonds, retirement accounts, IRA's, 401-K's, cash value of life insurance policies, etc.
- 17 **CURRENT IDENTIFICATION** (copy of Current Government issued Driver's License or other Photo ID) and **SOCIAL SECURITY NUMBERS** for the mortgage holder.....
- 18 **Please bring a money order payable to PCCA in the amount of \$20 to obtain a single credit report and \$40 for a joint credit report, if married.**

Your application cannot be processed without this information. We look forward to assisting you in the preparation and filing of your application. It is very important that you be on time for your appointment, if not it may result in your having to reschedule for another day and time. Please contact our office if you are unable to provide all of the above documentation or if you need to reschedule your appointment.

Deborah

CONFIRMATION OF FACE-TO-FACE MEETING

DATE 9/9/2016TO: Jonathan Valentin
1110 Elbridge Street
Philadelphia, Pa 19111From: PCCA
1617 JFK Blvd. Suite 1550
Philadelphia, Pa 19103

This is to confirm your appointment in our office on 9/27/16, at 9:30 Am to complete your application for a Mortgage Assistance loan. It is important that you keep this appointment so that your application can be filed within the required time period.

In order to expedite the completion of your application at the interview, please bring the the following information to your meeting:

Regional Housing Legal Services has a website to assist applicants in completing their HEMAP application: www.hemap.org

This process can help you better prepare your application for a HEMAP assistance loan. Feel free to access this website and start the process through this website. We can access and finalize your application when we meet on the above-mentioned date.

- 1) **LETTER OF CIRCUMSTANCES** - Please **print or type** and sign a detailed letter explaining the reasons for your current mortgage delinquency. Be as specific as possible, since this letter is very important in determining your eligibility for loan assistance.
- 2) **EVIDENCE or DOCUMENTED PROOF of expense-related circumstances** such as paid bills, legal counsel statements, copies of cash receipts and/ or cancelled checks for expenses that contributed to the mortgage delinquency.
- 3) **ACT 91 NOTICE** and any other Notices of Foreclosure (Complaint, Sheriff's Sale Notice).
- 4) **PAY STUBS** - **Three most recent consecutive** pay stubs for all working household members.
- 5) **VERIFICATION OF OTHER INCOME** - unemployment comp., worker's comp, child support, alimony, public assistance, social security, rent, pensions, etc
- 6) **EMPLOYMENT HISTORY** - names, addresses, position/title and dates worked of all employers where you have worked for during the past five years.
- 7) **FEDERAL INCOME TAX RETURNS** for the past 3 years If needed, transcripts can be obtained by calling the IRS at 1-(800) 829-1040 and ask for Form 4506.
- 8) **RECORDED PROPERTY DEED** - this can be obtained from your County Courthouse
- 9) **MONTHLY STATEMENTS** of all loans and charge accounts (account numbers & balances).
- 10) **PROOF OF REAL ESTATE TAXES** (if not escrowed by mortgagee) Copies of tax bills can be obtained from your county and township government offices
- 11) **HOMEOWNER'S INSURANCE POLICY**- can be obtained from Insurance Agent
- 12) **CHECKING & SAVINGS ACCOUNT STATEMENTS** verifying current balances
- 13) **VERIFICATION** of stocks, bonds, retirement accounts, IRA's, 401-K's, cash value of life insurance policies, etc.
- 14) **UTILITY BILLS** - copies of 3 summer & 3 winter bills for all utilities Contact utility companies, if necessary
- 15) **SOCIAL SECURITY NUMBERS** for all applicants and mortgagors
- 16) **MORTGAGE YEAR END STATEMENT** and mortgage payment book
- 17) **DRIVER'S LICENSES OR OTHER VALID PHOTO ID'S**

Action Plan

Case number: 15113

Client Names: Valentin, Jonathan
Address: 1110 Elbridge Street
Philadelphia, PA 19111

Barrier Type	Projected Resolution Time	Actual Start Date	Actual End Date	Resolved	Recommended Action
No barriers recorded					

FMCI
Credit Score
Maribel
9/27/2016

Client
Client will continue to go to h.s training until he seeks employment
Client will keep counselor in contact if any new employment appears

Counselor:
Counselor will mail the HEMAP

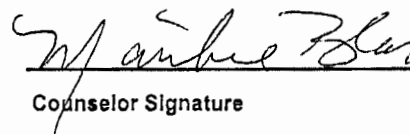
Goals
Client wishes to retain the property

Assessment
Client came to PCCA seeking help with his mortgage. He received an Act 91 Intention to foreclose.
Client has applied for unemployment however he appealed it. Client is waiting for a decision. Client joined the career link seeking employment. Counselor and client completed the HEMAP

Client Signature



Counselor Signature



EXIBIT

D

-----Original Message-----

From: jonathanvltn <jonathanvltn@aol.com>
To: whistleblower <whistleblower@hudoig.gov>
Sent: Wed, Jun 1, 2016 3:36 pm
Subject: Fwd: Follow up Case no: 15-PA-015

-----Original Message-----

From: jonathanvltn <jonathanvltn@aol.com>
To: crceexternalcomplaints <crceexternalcomplaints@dol.gov>
Sent: Wed, Jun 1, 2016 3:34 pm
Subject: Fwd: Follow up Case no: 15-PA-015

-----Original Message-----

From: jonathanvltn <jonathanvltn@aol.com>
To: customer.service <customer.service@ditech.com>
Sent: Wed, Jun 1, 2016 3:31 pm
Subject: Fwd: Documents to lender/ Follow up

-----Original Message-----

From: jonathanvltn <jonathanvltn@aol.com>
To: hotline <hotline@hudoig.gov>
Sent: Wed, Jun 1, 2016 3:21 pm
Subject: Fwd: Documents to lender/ Follow up

Hello,

This message is in response to a recent appointment I scheduled with the Esperanza Housing office. I meet with my case worker to discuss my mortgage file on April 27th, 2016. At which time we agreed that finding a job prior to filing any foreclosure prevention applications would be necessary. I then received a lenders package in the mail which included an application for mortgage assistance. The package was dated May 17th, 2016. Less than four days later the lender again send me another package stating that they had received my mortgage assistance application in the mail and would begin processing it immediately. This other package was dated May 20th, 2016

Then only people how would have the information necessary to complete an application for mortgage assistance and would know when to send such application to the lender would be the Housing office I've been working with and complaining about for over a year now. They are forging my signature and submitting fraudulent forms to my lender without my permission and consent. In doing so they are making me look incompetent, inpatient, inadequate for financial assistance and under prepared for a review. This is being done intentionally to minimize my review and processing time along with my time for preparation, please help.

Sincerely, Jonathan Valentin

-----Original Message-----

From: jonathanvltn <jonathanvltn@aol.com>
To: Mlannarelli <Mlannarelli@esperanza.us>
Sent: Mon, May 2, 2016 11:46 am
Subject: Re: Follow up

Hello,

When would be a good time to meet and discuss the details concerning my case...

Sincerely, Jonathan Valentin

-----Original Message-----

From: Maria Iannarelli <Mlannarelli@esperanza.us>
To: jonathanvltn <jonathanvltn@aol.com>
Sent: Mon, May 2, 2016 11:21 am
Subject: RE: Follow up

Hi Jonathan,
I just wanted to follow up.

Maria Iannarelli
Housing Executive Director
T 215-324-0746 Ext.239

From: jonathanvltn@aol.com [<mailto:jonathanvltn@aol.com>]
Sent: Monday, May 02, 2016 11:19 AM
To: Maria Iannarelli <Mlannarelli@esperanza.us>
Subject: Re: Follow up

Hello,

This message is an attempt to contact the Esperanza office regarding an email I received from a Mrs. Maria Iannarelli. The email involves an attempted to schedule a possible meeting to discuss the details concerning my mortgage account. Please feel free to contact me at 215-214-9431 as soon as possible, thank you.

Sincerely, Jonathan Valentin

-----Original Message-----

From: Maria Iannarelli <MIannarelli@esperanza.us>

To: jonathanvltm <jonathanvltm@aol.com>

Sent: Fri, Apr 29, 2016 3:34 pm

Subject: FW: Follow up

Hi Jonathan,

Have you gotten any documentation related to your mortgage?

Maria Iannarelli

Housing Executive Director

T 215-324-0746 Ext.239

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>

To: oac <oac@pha.phila.gov>

Sent: Wed, Apr 20, 2016 2:03 pm

Subject: Re: Documents to lender/ Follow up

Hello,

This email is to request assistance managing this concern. My property and personal safety are being jeopardized by this agency. My time and financial resources have been exhausted and know help finding funds to prevent foreclosure are being denied. The agency continues to insist that I sale the property and move out as soon as possible, please help. Thank you.

Sincerely, Jonathan Valentin

-----Original Message-----

From: OIG <OIG@pha.phila.gov>

To: jonathanvltm <jonathanvltm@aol.com>

Sent: Wed, Apr 20, 2016 11:11 am

Subject: Re: Follow up

Mr Valentin,

The Philadelphia Housing Authority (PHA) will not be able to assist you with this concern. Please contact the referenced agencies below.

Philadelphia Housing Authority
Office of Audit and Compliance

Phone: (215) 684 - 8300
Fax: (215) 684 - 1212

From "jonathanvlt@aol.com" <jonathanvlt@aol.com>
To OIG@pha.phila.gov
Date 04/19/2016 03:55 PM
Subject Re Follow up

Hello,

This email is to notify the OIG of my properties PHFA/ HUD approved grant eligibility statues. After becoming eligible for the two year PHFA loan/grant my financial stability has become an issue and I can no longer afford my monthly mortgage payments. The HUD certified Esperanza housing office is not willing to assist me in finding the funds necessary to prevent a foreclosure and is insisting that I sale the house as soon as possible, again please help.

Sincerely, Jonathan Valentin

-----Original Message-----

From: OIG <OIG@pha.phila.gov>
To: jonathanvlt <jonathanvlt@aol.com>
Sent: Wed, Apr 13, 2016 11:13 am
Subject: Re: Fwd: Follow up

Mr. Valentin,

Thank you for contacting the Philadelphia Housing Authority (PHA) Office of Audit and Compliance (OAC). This office is responsible for handling issues related to fraud, waste, corruption and abuse as it relates to PHA residents, employees, and vendors. As such, if you have concerns regarding Esperanza, I would encourage you to reach out to the Attorney General's Office, the Human Relations Commission, Housing and Urban Development, or the Inspector General.

Philadelphia Housing Authority
Office of Audit and Compliance
Phone: (215) 684 - 8300
Fax: (215) 684 - 1212

From "jonathanvlt@aol.com" <jonathanvlt@aol.com>
To oac@pha.phila.gov
Date 04/12/2016 05:17 PM
Subject Fwd Follow up

Hello,

This email again is to request assistance monitoring the business conduct and privacy policy being practiced by this housing agency. I would like to meet with them as soon as possible but need more information on how to protect my rights against illegal use of my private and personal information, thank you.

Sincerely, Jonathan Valentin

-----Original Message-----

From: Maria Iannarelli <MIannarelli@esperanza.us>

To: jonathanvltm <jonathanvltm@aol.com>

Sent: Tue, Apr 12, 2016 2:54 pm

Subject: Follow up

Hi Jonathan,

I wanted to follow up with you on your case. Did you get any document from the mortgage?

I called DITECH today and they have your documents that you sent on 3/25/16

Did you get a job?

Let me know if you still our services.

Sincerely,

Maria Iannarelli

Housing Executive Director

4261 North 5th St., Philadelphia, PA 19140

T 215-324-0746 Ext 239 F 215-967-1018

W www.esperanza.us; E miannarelli@esperanza.us



HUD Approved Agency



Certified Agency

-----Original Message-----

From: Maria Iannarelli <MIannarelli@esperanza.us>

To: jonathanvltm <jonathanvltm@aol.com>

Sent: Thu, Feb 18, 2016 10:09 am

Subject: Documents to lender

Jonathan,

Yes I did but the fax did not go thru. I decided to call the lender and ask if they really needed this package because their letter is only asking for three documents:

1-4506 T

2-Most Recent Utility bill

3- Most Recent Pay Stubs Reflecting the Most Recent 30-Day's Earnings.

When I called them yesterday, the lender only requested the documentation stated above and that's what I faxed. They did not ask for a new financial package.

If there's a new letter that you have from the lender requesting a new financial package, forward it to me.

Sincerely,

Maria Iannarelli

Housing Executive Director

National Programs

T 215-324-0746 Ext.239

From: jonathanvltm@aol.com [<mailto:jonathanvltm@aol.com>]

Sent: Wednesday, February 17, 2016 5:02 PM

To: Maria Iannarelli <MIannarelli@esperanza.us>

Subject: Re: Message from NP01

Hello,

You did not send them the 56 page financial package we prepared for them on Monday...

-----Original Message-----

From: Maria Iannarelli <MIannarelli@esperanza.us>

To: jonathanvltm <jonathanvltm@aol.com>

Sent: Wed, Feb 17, 2016 10:05 am

Subject: FW: Message from NP01

Good morning Jonathan,

The mortgage received the documentation asked on their letter

In order to obtain a modification, the lender needs proof of continue income.

Your only continuing income as a today is food stamps and this is not money to be used to pay for your mortgage.

Loan Modifications

Those struggling with mortgage payments are able to request modifications from the mortgage providers. While requirements will vary depending on who the mortgage providers are, some criteria are common. Applicants requesting modifications must be:

- experiencing a documented financial hardship. This can include being laid off.
- missing several payments already.
- the owner of the residence, and the mortgage must be for a primary residence.
- still financial secure, so as not to have filed for bankruptcy yet.

Sincerely,

Maria Iannarelli

Housing Executive Director

National Programs

1 215-324-0746 Ext.239

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>
To: miannarelli <miannarelli@esperanza.us>
Sent: Sat, Feb 6, 2016 4:33 am
Subject: Fwd: Ditech Financial LLC. 2 of 2 part 4

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>
To: miannarelli <miannarelli@esperanza.us>
Sent: Sat, Feb 6, 2016 4:28 am
Subject: Fwd: Ditech Financial LLC. 2 of 2 part 3

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>
To: miannarelli <miannarelli@esperanza.us>
Sent: Sat, Feb 6, 2016 4:24 am
Subject: Fwd: Ditech Financial LLC. 2 of 2 part 2

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>
To: miannarelli <miannarelli@esperanza.us>
Sent: Sat, Feb 6, 2016 4:17 am
Subject: Fwd: Ditech Financial LLC. 2 of 2

-----Original Message-----

From: jonathanvltm <jonathanvltm@aol.com>
To: miannarelli <miannarelli@esperanza.us>
Sent: Fri, Feb 5, 2016 11:24 pm
Subject: Re: Ditech Financial LLC 1 of 2

Hello,

This email is to request assistance from the Esperanza housing office faxing the attached documents I've included in this message.

Please fax Ditech Financial LLC., attention Loss Mitigation T214, account number 621708874 to fax number 1-877--612-2422. When finished, please scan and email me a copy of the confirmation sheet and cover letter, thank you.

Sincerely, Jonathan Valentin

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: Jonathan Valenz

Signature: Jonathan Valenz

Name: Jonathan Valenz

Attorney No. (if applicable): _____

VERIFICATION

Plaintiff(s) Jonathan Valentin

hereby verify that the statements set forth in the foregoing Complaint are true and correct to the best of my knowledge, information and belief. I understand that these statements are made subject to the penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Jonathan Valentin
Signature

Jonathan Valentin
Signature

Dated: 04/24/2018

EXHIBIT

F D



Esperanza **HOUSING COUNSELING**

YOU HOLD THE KEYS TO YOUR FUTURE

4261 North 5th Street
Philadelphia, PA 19140
Phone: 215-324-0746
Fax: 215-967-1018
www.esperanza.us

Dear Homeowner,

I'm so glad you took that tough first step and contacted us about your mortgage. We understand how hard that was to do and promise to work with you to find a resolution to your situation.

To assist us in providing you with the most effective and efficient service, please complete the attached worksheet as thoroughly as possible. Please give the monthly housing expenses plan careful attention. This information is the key element of resolving your financial situation. If there's questions or information you don't understand, that's okay. Do your best with it.

You will find there is an emphasis on being truthful. We can't help with a resolution unless we have a complete and accurate financial package that includes all the documentation required for your appointment.

Our first appointment will last two hours and a half. Please arrive on time. Many other families are in the same position as you and the demand for our services is high. If you arrive thirty minutes late, another appointment will be given to you.

You have taken the first step to resolving your situation. I look forward to working with you.

Sincerely,

Housing Counselor

Date of Appointment: ____/____/____

Time:____am pm

Documentation to bring:

- ☐ Pay stubs - 1 month
 - ☐ Bank statements (all pages) for 2 months: Saving and Checking.
 - ☐ Tax return yr 2011 and 2012 with all the forms (W2, 1099, etc)
 - ☐ Hardship letter (see page #3)
 - ☐ Welfare letter and proof of where is deposited.
 - ☐ Food Stamp letter and proof of where is deposited.
 - ☐ Social Security disability letter and proof of where is deposited.
 - ☐ Pension letter and proof of where is deposited
 - ☐ Child support court order and proof of where is deposited.
 - ☐ Utilities bills (water, gas, electric) for last month.
 - ☐ Car bill
 - ☐ Car insurance
 - ☐ Last mortgage statement
 - ☐ Paperwork from when you purchase or refinance your home.
 - ☐ Deed
 - ☐ Act 91 letter
 - ☐ Bankruptcy documentation
 - ☐ Home Owner's Insurance Policy
 - ☐ IRS Tax returns for 2011, 2012 with all the forms (w2's, 1099, etc)
 - ☐ Social Security and Picture ID
 - ☐ Proof of other income in the property.
 - ☐ Other:
-

Housing Department.
4261 N 5th St. (Second Floor)
Philadelphia, PA 19140
215-324-0746

Applicant Contact Information

Name: _____

Address: _____

Number of person/s living in the home _____

Date of your ACT 91 letter: ____/____/____

Property Type☐ Single home ☐ Row ☐ Twin ☐ Multifamily ☐ Mixed use**Ownership**Is your name on the deed-title of the property in delinquency? ☐ Yes ☐ No**Circumstances Descriptions**

Date of Mortgage Delinquency? ____/____/____ # of _____ months behind

Regular mortgage payments \$ _____

Do you have Court for the mortgage delinquency? ☐ Yes ☐ No Court date: _____**HARDSHIP: What specifically caused your mortgage delinquency?**

☐ Unemployment ☐ Medical Expense ☐ Reduced Income ☐ Problems with the lender
☐ Car Repair Expense ☐ Death in the family ☐ Divorce/ Separation ☐ Other Expenses
☐ Home Repair Expense ☐ Illness/ Disability ☐ Utilities Expense

Do you have proof/documentation of the hardship mentioned above? ☐ Yes ☐ No

If yes, please bring it to your appointment.

Supplemental Income:

Did you receive unemployment compensation, workmen's compensation, child support, a lump sum award, or any other type of income as a result of the circumstances?

If yes, please specify the type, amount and beginning and ending dates of such assistance.

What are you doing to improve your situation?

<input type="checkbox"/> Searching for a Job	<input type="checkbox"/> Budget counseling
<input type="checkbox"/> Training School	<input type="checkbox"/> applying for disability benefits
<input type="checkbox"/> Rent a room in my home	<input type="checkbox"/> treatment for a medical problem
<input type="checkbox"/> Applying for a payment plan with the Utilities	<input type="checkbox"/> Got or will get Utilities Help
<input type="checkbox"/> Will borrow the money	<input type="checkbox"/> Other _____

HARDSHIP LETTER.

Please describe what caused the mortgage delinquency, provide dates.

Por favor describa que causo la delinquencia de su hipoteca. Mencione fechas.

What are you doing to improve your financial situation?

Que esta haciendo para mejorar su situacion financiera ?

Signature

Date



MARIA IANNARELLI
EXECUTIVE HOUSING DIRECTOR

miannarelli@esperanza.us
phone: (215) 324-0746
fax: (215) 324-2542

visit us online www.esperanza.us
4261 North 5th Street, Philadelphia, PA 19140

Mortgage Contact:

~~Direct~~ - Contact -

Rebecca

1-800-643-0202
Ext. 64932

Monthly Expenses			Loan # 621708874																																		
Homeowner's Name:		Jonathan Valentin																																			
Address:		11110 Elbridge St. Phila. PA 19111																																			
Principal	\$ 499.63	\$ 454.60	Housing Information: <input type="checkbox"/> Rent <input checked="" type="checkbox"/> OWN <input type="checkbox"/> Buying <input type="checkbox"/> Single <input checked="" type="checkbox"/> Row <input type="checkbox"/> Twin <input type="checkbox"/> Appt <input type="checkbox"/> Duplex																																		
Interest	\$ -	\$ -																																			
Property Taxes	\$ -	\$ -																																			
Insurance	\$ -	\$ -																																			
PMI	\$ -	\$ -																																			
SubTotal	\$ 499.63	\$ 454.60	Live in the Home? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Household # 1																																		
Electric	\$ 105.00	\$ 60.00	Loan Information: Servicer: Ditech Purchase Price \$ 87,200.00 <input checked="" type="checkbox"/> Conv <input type="checkbox"/> FHA <input type="checkbox"/> VA Interest 3.000% <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> ARM Purchase Date 10/1/2006 VALUE \$ 111,000.00 Delq. Date: 6/2/2014 Months Behind: 17																																		
Gas/Oil	\$ 62.00	\$ 62.00																																			
Water/Sewer	\$ 53.00	\$ 53.00																																			
Telephone	\$ -	\$ -																																			
Cell Phone	\$ -	\$ -																																			
Cable/ Internet	\$ -	\$ -	Amount Behind \$ 9,330.44 <input type="checkbox"/> Freddie Mac Remaining Balance \$ 79,288.25 <input type="checkbox"/> Fannie Mae New Principal Balance \$ 88,618.69																																		
Home Maintenance	\$ -	\$ -																																			
Lawn/Alarm sys	\$ -	\$ -																																			
SubTotal	\$ 220.00	\$ 175.00																																			
Food	\$ 194.00	\$ 194.00																																			
Sch/work Lunches	\$ -	\$ -	ASSETS: Savings Balance: \$ - Checking Balance: \$ -																																		
Dinning Out	\$ -	\$ -																																			
Personal Items	\$ 60.00	\$ 25.00																																			
Cleaning Supplies	\$ -	\$ -																																			
Pet Food / Care	\$ -	\$ -																																			
SubTotal	\$ 254.00	\$ 219.00	(1) Car information: Year: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor Model: _____ Balance: \$ - Value: \$ 1,900.00 (2) Car information: Year: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor Model: _____ Balance: _____ Value: \$ -																																		
Gasoline	\$ -	\$ -																																			
Car Insurance	\$ -	\$ -																																			
Auto Tag/Inspection	\$ -	\$ -																																			
Public Transportation	\$ 100.00	\$ 100.00																																			
Parking/Tolls	\$ -	\$ -	INCOME: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>GROSS</th> <th>NET</th> </tr> </thead> <tbody> <tr> <td>Paystubs</td> <td>\$ 1,272.46</td> <td>\$ 827.00</td> </tr> <tr> <td>SSI</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Social Security</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Welfare</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Food Stamps</td> <td>\$ 194.00</td> <td>\$ 194.00</td> </tr> <tr> <td>Rent</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Child Support</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Alimony</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>Self Employ</td> <td>\$ -</td> <td>\$ -</td> </tr> <tr> <td>TOTAL</td> <td>\$ 1,466.46</td> <td>\$ 1,021.00</td> </tr> </tbody> </table>			GROSS	NET	Paystubs	\$ 1,272.46	\$ 827.00	SSI	\$ -	\$ -	Social Security	\$ -	\$ -	Welfare	\$ -	\$ -	Food Stamps	\$ 194.00	\$ 194.00	Rent	\$ -	\$ -	Child Support	\$ -	\$ -	Alimony	\$ -	\$ -	Self Employ	\$ -	\$ -	TOTAL	\$ 1,466.46	\$ 1,021.00
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Clothing	\$ -	\$ -																																			
Dependent Care	\$ -	\$ -																																			
Day Care/BabySit	\$ -	\$ -																																			
Diapers/Formulas	\$ -	\$ -	<i>the mortgage has this income.</i>																																		
Child S./ Alimony	\$ -	\$ -																																			
SubTotal	\$ -	\$ -																																			
Rental Insurance	\$ -	\$ -																																			
Life Insurance	\$ -	\$ -																																			
Health Insurance	\$ -	\$ -	Annual Income \$ 17,697.52 FI 0.3407048 DTI 34%																																		
Co-Pays/Doctors visit	\$ -	\$ -																																			
Medical bills	\$ -	\$ -																																			
Total	\$ -	\$ -																																			
Hair Cuts/Barber	\$ 10.00	\$ 10.00																																			
Religious	\$ -	\$ -	To solve for P&I <table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td>Interest rate:</td> <td>2.000%</td> </tr> <tr> <td>Term (in years):</td> <td>40</td> </tr> <tr> <td>Remaining Balance</td> <td>\$88,618.69</td> </tr> <tr> <td>P&I</td> <td>(\$268.36)</td> </tr> <tr> <td>Re-type P&I</td> <td>\$268.36</td> </tr> <tr> <td>Escrow</td> <td>\$183.91</td> </tr> <tr> <td>NEW PITI</td> <td>\$452.27</td> </tr> </tbody> </table>		Interest rate:	2.000%	Term (in years):	40	Remaining Balance	\$88,618.69	P&I	(\$268.36)	Re-type P&I	\$268.36	Escrow	\$183.91	NEW PITI	\$452.27																			
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Cigar/Alcohol	\$ -	\$ -																																			
Union Dues	\$ -	\$ -																																			
Tuition/books	\$ -	\$ -																																			
SubTotal	\$ 10.00	\$ 10.00	Agency: ESPERANZA Telephone: 215-324-0746 Housing Counselor:																																		
Car Payments	\$ -	\$ -																																			
Credit Cards	\$ -	\$ -																																			
Loans	\$ -	\$ -																																			
IRS Payments	\$ -	\$ -																																			
2nd Mortgage	\$ -	\$ -	Client's Signature: <i>Jonathan Valentin</i> Date: 4/11/30/2013																																		
Sub Total	\$ -	\$ -																																			
Total Expenses	\$ 1,083.63	\$ 958.60																																			
NET INCOME	\$ 1,021.00	\$ 1,021.00																																			
SUR PLUS	\$ (62.63)	\$ 62.40																																			

ACTION PLAN

This Housing Counseling Action Plan is an agreement between the client and housing counselor to work together towards resolving a housing issue and/or achieving a housing goal.

I(we) Jonathan Valentin The client(s) agree to:

CALL ME WHEN YOU HAVE ALL THE DOCUMENTATION

Attend an appointment on the date : **BELOW**

<input checked="" type="checkbox"/> Follow up	<input type="checkbox"/> Missing Documentation	<input type="checkbox"/> Complete Financial package
<input type="checkbox"/> Contact Lender/Realtor/City/Agency/Attorney	<input type="checkbox"/> Other: _____	

Missing Documentation:

x	Last Month of Pay Stubs		Current Letter for SSI		Notarized Contribution Letter
	Current Letter for Welfare		Supplemental Income		
	Current Letter for Food Stamps		Current Letter for SSA		
	2013 tax return with all forms		Letter for Retirement		
	2014 tax return with all forms		Hardship Letter		
	3 months of Bank Statements		Court Child Support		

ACTION

x	Follow your BUDGET prepared today.		
	Begin paying on time	<input type="checkbox"/>	Continue paying your bills on time
	Begin Saving	<input type="checkbox"/>	Continue Saving for GOAL: _____
	REFERRED TO: (attached Letter)		Other: _____

ASSESSMENT:

- 1) Today we spoke to the lender Ditech. They let us know that you have two options: 1) For a modification, as a TODAY they are waiting for: 1) 30 days of Paystubs and 2) list of Housing Expenses
- 2) YOU need to get a JOB and KEEP the JOB !! Once you get one, you can ask them for a Hiring letter that states when you will start, how much you will get paid and how often.
- 3) I can send this to the mortgage as soon as you have the "Letter of Hiring" and prepare a "list of housing Expenses for you"
- 4) The lender also let us know that option 2) is that for you to bring the Delinquency CURRENT the amount that you will have to send is \$9,083.63. This amount covers until December 2015.
- 5) If you send the amount to bring your delinquency current, please understand that you will have to be ready to pay your January current mortgage payments of \$ 513.

Housing Counselor will take the next steps:

x	Waiting for document or Action		Follow up with you
	Mail documentation	<input type="checkbox"/>	Fax Documentation to: _____

Important Disclosure:

Client(s) understand that has the freedom to choose: lenders, loan products, homes, realtor, and home inspectors. Housing Counselor can give you a list of them but cannot place you to one particular entity.

ALL OF OUR SERVICES ARE FREE OF CHARGE EXCEPT FOR THE CREDIT REPORT OF \$14.80 (Money Order)

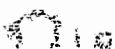
Jonathan Valentin
Client Signature

12/17/2015
Date

12/17/2015
Client Signature Date

Maria Iannarelli
Housing Counselor

12/17/2015
Date



**Esperanza
HOUSING
COUNSELING**
YOU FIGHT THE BATTLE WE FIGHT FOR YOU